

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC AFFAIRS

16 OCT Office Use Only: 24

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

2016 Senate IMPACT

ADDRESS (number and street) ▼

918 Pennsylvania Ave SE

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00616979

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☒

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Judith Zamore

Signature of Treasurer

Judith Zamore

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

2016 Senate IMPACT

Report Covering the Period: From:

 M M / D D / Y Y Y Y
 07 / 01 / 2016

To:

 M M / D D / Y Y Y Y
 09 / 30 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))..	71,450.00	231,574.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..	71,450.00	231,574.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	801.83	4,592.95
(b) Total Offsets to Operating Expenditures (from Line 14) ..	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..	801.83	4,592.95
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	3,988.26	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

201610180200441920

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

2016 Senate IMPACT

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2016

To:

MM / DD / YYYY
09 / 30 / 2016

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)...

49,950.00

202,074.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL of contributions
from individuals .

49,950.00

202,074.00

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees
(such as PACs)...

21,500.00

29,500.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

71,450.00

231,574.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate...

0.00

0.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

71,450.00

231,574.00

201610180260441921

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES ..	801.83	4,592.95
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	86,508.07	222,992.79
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate ..	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) ..	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	0.00
(b) Political Party Committees ..	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) ..	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	87,309.90	227,585.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ..	19,848.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	71,450.00
25. SUBTOTAL (add Line 23 and Line 24) ..	91,298.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ...	87,309.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	3,988.26

201610180200441922

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial) A. Eugene Ludwig		Date of Receipt MM / DD / YYYY 07 / 21 / 2016	
Mailing Address 2620 Foxhall Rd NW City State Zip Code Washington, DC 20007		Amount of Each Receipt this Period \$ 5,000.00 <input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Promontory Occupation Founder & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 5,000.00	
Full Name (Last, First, Middle Initial) B. Lawrence O'Brien		Date of Receipt MM / DD / YYYY 07 / 21 / 2016	
Mailing Address 1350 Eye St NW City State Zip Code Washington, DC 20005		Amount of Each Receipt this Period \$ 4,000.00 <input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer OB-C Group Occupation Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 4,000.00	
Full Name (Last, First, Middle Initial) C. Bradley Vogt		Date of Receipt MM / DD / YYYY 07 / 21 / 2016	
Mailing Address 5212 Partridge Ln NW City State Zip Code Washington, DC 20016		Amount of Each Receipt this Period \$ 2,700.00 <input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Capital Group Occupation Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 2,700.00	
SUBTOTAL of Receipts This Page (optional).....		\$ 11,700.00	
TOTAL This Period (last page this line number only).....		\$	

201610180200441923

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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PAGE 2 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial) Wiley Rein LLP		Date of Receipt MM / DD / YYYY 07 / 21 / 2016	
A. Mailing Address 1776 K St NW City State Zip Code Washington, DC 20006		Amount of Each Receipt this Period \$ 5,000.00 <input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Election Cycle-to-Date \$ 5,000.00	Par rship - Par s below if Itemized	
Full Name (Last, First, Middle Initial) B. Norman Brownstein		Date of Receipt MM / DD / YYYY 07 / 31 / 2016	
Mailing Address 410 17th St Ste 2200 City State Zip Code Denver, CO 80202		Amount of Each Receipt this Period \$ 1,000.00 <input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Brownstein Hyatt Farber Schreck Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney Election Cycle-to-Date \$ 1,000.00	Earmarked through ActBlue	
Full Name (Last, First, Middle Initial) C. ActBlue (C00401224)		Date of Receipt MM / DD / YYYY 07 / 31 / 2016	
Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144		Amount of Each Receipt this Period \$ 1,000.00 <input checked="" type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Election Cycle-to-Date \$ 88,650.00	Contribution earmarked through ActBlue contribution	
SUBTOTAL of Receipts This Page (optional).....		\$ 6,000.00	
TOTAL This Period (last page this line number only).....		\$	

201610180200441924

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 3 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>Full Name (Last, First, Middle Initial) Robert Van Heuvelen</p>		<p>Date of Receipt MM / DD / YYYY 07 / 31 / 2016</p>	
<p>A. Mailing Address 1822 W Milham Ave City State Zip Code Portage, MI 49024</p>		<p>Amount of Each Receipt this Period 2,500.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p><input type="checkbox"/> Memo Item</p>	
<p>Name of Employer VH Strategies LLC</p>		<p>Occupation Founder & CEO</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 2,500.00</p>	
<p>Full Name (Last, First, Middle Initial) ActBlue (C00401224)</p>		<p>Date of Receipt MM / DD / YYYY 07 / 31 / 2016</p>	
<p>B. Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144</p>		<p>Amount of Each Receipt this Period 2,500.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p><input checked="" type="checkbox"/> Memo Item</p>	
<p>Name of Employer</p>		<p>Occupation</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 88,650.00</p>	
<p>Full Name (Last, First, Middle Initial) John Kelly</p>		<p>Date of Receipt MM / DD / YYYY 08 / 01 / 2016</p>	
<p>C. Mailing Address 421 Palo Verde Dr City State Zip Code Naples, FL 34119</p>		<p>Amount of Each Receipt this Period 2,500.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p><input type="checkbox"/> Memo Item</p>	
<p>Name of Employer The McPherson Group LLP</p>		<p>Occupation Partner</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 2,500.00</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p>		<p>5,000.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p></p>	

201610180200441925

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 4 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>Full Name (Last, First, Middle Initial) ActBlue (C00401224)</p>		<p>Date of Receipt MM / DD / YYYY 08 / 01 / 2016</p>	
<p>A. Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144</p>		<p>Amount of Each Receipt this Period 2,500.00</p> <p><input checked="" type="checkbox"/> Memo Item</p> <p>Contributor earmarked through ActBlue contribution</p>	
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 88,650.00</p>			
<p>B. Full Name (Last, First, Middle Initial) Dan Tate</p>		<p>Date of Receipt MM / DD / YYYY 08 / 01 / 2016</p>	
<p>Mailing Address 777 6th St NW 8th Fl City State Zip Code Washington, DC 20001</p>		<p>Amount of Each Receipt this Period 1,000.00</p> <p><input type="checkbox"/> Memo Item</p> <p>Earmarked through ActBlue</p>	
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer Occupation Forbes Tate Partners Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1,000.00</p>			
<p>C. Full Name (Last, First, Middle Initial) ActBlue (C00401224)</p>		<p>Date of Receipt MM / DD / YYYY 08 / 01 / 2016</p>	
<p>Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144</p>		<p>Amount of Each Receipt this Period 1,000.00</p> <p><input checked="" type="checkbox"/> Memo Item</p> <p>Contributor earmarked through ActBlue contribution</p>	
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 88,650.00</p>			
<p>SUBTOTAL of Receipts This Page (optional).....</p>		<p>1,000.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p></p>	

201610180200441926

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 5 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial) A. Michael Levy		Date of Receipt MM / DD / YYYY 08 / 07 / 2016	
Mailing Address 230 8th St SE			
City Washington, DC	State DC	Zip Code 20003	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1,300.00	
Name of Employer BHFS	Occupation Policy Director	<input type="checkbox"/> Memo Item	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,300.00	Earmarked through ActBlue	

Full Name (Last, First, Middle Initial) B. ActBlue (C00401224)		Date of Receipt MM / DD / YYYY 08 / 07 / 2016	
Mailing Address P.O. Box 441146			
City Somerville, MA	State MA	Zip Code 02144	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1,300.00	
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 88,650.00	Contribution earmarked through ActBlue contribution	

Full Name (Last, First, Middle Initial) C. William Wheeler		Date of Receipt MM / DD / YYYY 08 / 07 / 2016	
Mailing Address 147 Brite Ave			
City Scarsdale, NY	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2,700.00	
Name of Employer Athene	Occupation Executive	<input type="checkbox"/> Memo Item	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,700.00	Earmarked through ActBlue	

SUBTOTAL of Receipts This Page (optional).....		4,000.00	
TOTAL This Period (last page this line number only).....			

201610180200441927

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 6 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial)

ActBlue (C00401224)

A.

Mailing Address

P.O. Box 441146

City

State

Zip Code

Somerville, MA 02144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

88,650.00

Date of Receipt

MM / DD / YYYY
08 / 07 / 2016

Amount of Each Receipt this Period

2,700.00

☒ Memo Item

Contributor earmarked through ActBlue
contribution

Full Name (Last, First, Middle Initial)

Tom McDonald

B.

Mailing Address

1050 Connecticut Ave NW

Ste 100

City

State

Zip Code

Washington, DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baker Hostetler

Occupation

Partner

Receipt For:

☐ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

5,000.00

Date of Receipt

MM / DD / YYYY
08 / 10 / 2016

Amount of Each Receipt this Period

5,000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Seneca Nation of Indians

C.

Mailing Address

PO Box 231

City

State

Zip Code

Salamanca, NY 14779

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

5,000.00

Date of Receipt

MM / DD / YYYY
08 / 10 / 2016

Amount of Each Receipt this Period

5,000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

10,000.00

201610180200411928

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 7 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>Full Name (Last, First, Middle Initial) A. Scott Parven</p> <p>Mailing Address 2301 Connecticut Ave NW City State Zip Code Washington, DC 20008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Akin Gump Strauss Hauer & Feld LLP</p> <p>Occupation Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 500.00</p>		<p>Date of Receipt MM / DD / YYYY 08 / 14 / 2016</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Memo Item</p> <p>Earmarked through ActBlue</p>
<p>Full Name (Last, First, Middle Initial) B. ActBlue (C00401224)</p> <p>Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer</p> <p>Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 88,650.00</p>		<p>Date of Receipt MM / DD / YYYY 08 / 14 / 2016</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input checked="" type="checkbox"/> Memo Item</p> <p>Contributor earmarked through ActBlue contribution</p>
<p>Full Name (Last, First, Middle Initial) C. Alfred Moses</p> <p>Mailing Address 801 17th St NW Ste 1100 City State Zip Code Washington, DC 20006</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Promontory Financial</p> <p>Occupation Board Member</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 5,000.00</p>		<p>Date of Receipt MM / DD / YYYY 08 / 30 / 2016</p> <p>Amount of Each Receipt this Period 5,000.00</p> <p><input type="checkbox"/> Memo Item</p>
<p>SUBTOTAL of Receipts This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>		<p>5,500.00</p> <p></p>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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FOR LINE NUMBER:
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PAGE 8 OF 9

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>Full Name (Last, First, Middle Initial) A. Andrew Fields</p> <p>Mailing Address 5914 Wellesley Ave City State Zip Code Pittsburgh, PA 15206</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Mercury Strategies</p> <p>Occupation Government Relations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 1,750.00</p>		<p>Date of Receipt 09 / 11 / 2016</p> <p>Amount of Each Receipt this Period 1,750.00</p> <p><input type="checkbox"/> Memo Item</p> <p>Earmarked through ActBlue</p>
<p>Full Name (Last, First, Middle Initial) B. ActBlue (C00401224)</p> <p>Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer</p> <p>Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 88,650.00</p>		<p>Date of Receipt 09 / 11 / 2016</p> <p>Amount of Each Receipt this Period 1,750.00</p> <p><input checked="" type="checkbox"/> Memo Item</p> <p>Contribution earmarked through ActBlue not a contribution</p>
<p>Full Name (Last, First, Middle Initial) C. Charles Mellody</p> <p>Mailing Address 6505 Fallwind Ln City State Zip Code Bethesda, MD 20817</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Capitol Legislative Strategies</p> <p>Occupation Government Relations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 5,000.00</p>		<p>Date of Receipt 09 / 28 / 2016</p> <p>Amount of Each Receipt this Period 5,000.00</p> <p><input type="checkbox"/> Memo Item</p> <p>Earmarked through ActBlue</p>
<p>SUBTOTAL of Receipts This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>		<p>6,750.00</p> <p></p>

201610180200441930

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>Full Name (Last, First, Middle Initial) ActBlue (C00401224)</p>		<p>Date of Receipt MM / DD / YYYY 09 / 28 / 2016</p>	
<p>A. Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144</p>		<p>Amount of Each Receipt this Period \$ 5,000.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p><input checked="" type="checkbox"/> Memo Item</p>	
<p>Name of Employer Occupation</p>		<p>Contributi earmarked through ActBlue contributi</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date \$ 88,650.00</p>	
<p>B. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code</p>		<p>Date of Receipt MM / DD / YYYY</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period</p>	
<p>Name of Employer Occupation</p>		<p><input type="checkbox"/> Memo Item</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date</p>	
<p>C. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code</p>		<p>Date of Receipt MM / DD / YYYY</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period</p>	
<p>Name of Employer Occupation</p>		<p><input type="checkbox"/> Memo Item</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p>		<p>\$ 0.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p>\$ 49,950.00</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial)

21st Century Oncology PAC

A.

Mailing Address

6321 Daniels Pkwy

Ste 200

City

State

Zip Code

Fort Myers, FL 33912

FEC ID number of contributing
federal political committee.

C C00385120

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

7,500.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2016

Amount of Each Receipt this Period

7,500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jstreet PAC

B.

Mailing Address

PO Box 33106

City

State

Zip Code

Washington, DC 20033

FEC ID number of contributing
federal political committee.

C C00441949

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1,000.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2016

Amount of Each Receipt this Period

1,000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Long Leaf Pine PAC

C.

Mailing Address

1333 New Hampshire Ave NW

City

State

Zip Code

Washington, DC 20036

FEC ID number of contributing
federal political committee.

C C00459305

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2016

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9,000.00

201610180200441932

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial)

Teva PAC

A.

Mailing Address

1090 Horsham Rd

PO Box 1090

City

State

Zip Code

N Wales, PA 19454

FEC ID number of contributing
federal political committee.

C C00434811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5,000.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2016

Amount of Each Receipt this Period

5,000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

The Hall Way PAC (Hall Render Killian Heath Lyman Empl PAC)

Mailing Address

1 American Sq

Ste 2000

City

State

Zip Code

Indianapolis, IN 46282

FEC ID number of contributing
federal political committee.

C C00552083

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2,500.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2016

Amount of Each Receipt this Period

2,500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

CTIA PAC

Mailing Address

1400 16th St NW

Ste 600

City

State

Zip Code

Washington, DC 20036

FEC ID number of contributing
federal political committee.

C C00262295

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5,000.00

Date of Receipt

MM / DD / YYYY
08 / 01 / 2016

Amount of Each Receipt this Period

5,000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12,500.00

21,500.00

20161018026041932

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>A. Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <hr/> <p>Mailing Address 366 Summer St</p> <hr/> <p>City _____ State _____ Zip Code _____ Somerville, MA 02144</p> <hr/> <p>Purpose of Disbursement Merchant Fees</p> <hr/> <p>Candidate Name _____</p> <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</p> <p>State: _____ District: _____</p>	<p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 07 / 31 / 2016</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px;">138.25</div> <p><input type="checkbox"/> Memo Item</p>
<p>B. Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <hr/> <p>Mailing Address 366 Summer St</p> <hr/> <p>City _____ State _____ Zip Code _____ Somerville, MA 02144</p> <hr/> <p>Purpose of Disbursement Merchant Fees</p> <hr/> <p>Candidate Name _____</p> <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</p> <p>State: _____ District: _____</p>	<p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 08 / 01 / 2016</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px;">138.25</div> <p><input type="checkbox"/> Memo Item</p>
<p>C. Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <hr/> <p>Mailing Address 366 Summer St</p> <hr/> <p>City _____ State _____ Zip Code _____ Somerville, MA 02144</p> <hr/> <p>Purpose of Disbursement Merchant Fees</p> <hr/> <p>Candidate Name _____</p> <div style="float: right; border: 1px solid black; padding: 2px;">Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</p> <p>State: _____ District: _____</p>	<p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 08 / 07 / 2016</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px;">158.00</div> <p><input type="checkbox"/> Memo Item</p>
<p>SUBTOTAL of Disbursements This Page (optional).....</p> <hr/> <p>TOTAL This Period (last page this line number only).....</p>	

2016101802004419524

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 14 / 2016	
Mailing Address 366 Summer St			
City	State	Zip Code	
Somerville, MA		02144	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item	Amount of Each Disbursement this Period 19.75
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 11 / 2016	
Mailing Address 366 Summer St			
City	State	Zip Code	
Somerville, MA		02144	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item	Amount of Each Disbursement this Period 69.13
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 28 / 2016	
Mailing Address 366 Summer St			
City	State	Zip Code	
Somerville, MA		02144	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item	Amount of Each Disbursement this Period 197.50
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

286.38

801.83

201610180200441935

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 3

☐ 17 ☒ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>A. Full Name (Last, First, Middle Initial) Missourians for Kander</p> <p>Mailing Address PO BOX 548</p> <p>City: Columbia, MO 65205 State: Zip Code: </p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name Jason Kander</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: MO District: </p>	<p>Date of Disbursement MM / DD / YYYY 08 / 02 / 2016</p> <p>Amount of Each Disbursement this Period \$ 16,678.07</p> <p><input type="checkbox"/> Memo Item</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Patrick Murphy</p> <p>Mailing Address 4521 PGA Blvd #412</p> <p>City: Palm Beach Gardens, FL 33418 State: Zip Code: </p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name Patrick Murphy</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: FL District: </p>	<p>Date of Disbursement MM / DD / YYYY 08 / 30 / 2016</p> <p>Amount of Each Disbursement this Period \$ 23,000.00</p> <p><input type="checkbox"/> Memo Item</p>
<p>C. Full Name (Last, First, Middle Initial) Catherine Cortez Masto for Senate</p> <p>Mailing Address 8020 S Rainbow Blvd #100-112</p> <p>City: Las Vegas, NV 89139 State: Zip Code: </p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name Catherine Cortez Masto</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: NV District: </p>	<p>Date of Disbursement MM / DD / YYYY 09 / 12 / 2016</p> <p>Amount of Each Disbursement this Period \$ 20,100.00</p> <p><input type="checkbox"/> Memo Item</p>
<p>SUBTOTAL of Disbursements This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>	

2016101802004419320

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 3

☐ 17 ☒ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

<p>A. Full Name (Last, First, Middle Initial) Tammy for Illinois</p> <hr/> <p>Mailing Address PO BOX 10793</p> <hr/> <p>City State Zip Code Chicago, IL 60610</p> <hr/> <p>Purpose of Disbursement Transfer</p> <hr/> <p>Candidate Name L. Tammy Duckworth</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <hr/> <p>State: IL District:</p>	<p>Date of Disbursement MM / DD / YYYY 09 / 13 / 2016</p> <hr/> <p>Amount of Each Disbursement this Period 16,500.00</p> <hr/> <p><input type="checkbox"/> Memo Item</p>
<p>B. Full Name (Last, First, Middle Initial) Catherine Cortez Masto for Senate</p> <hr/> <p>Mailing Address 8020 S Rainbow Blvd #100-112</p> <hr/> <p>City State Zip Code Las Vegas, NV 89139</p> <hr/> <p>Purpose of Disbursement Transfer</p> <hr/> <p>Candidate Name Catherine Cortez Masto</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <hr/> <p>State: NV District:</p>	<p>Date of Disbursement MM / DD / YYYY 09 / 30 / 2016</p> <hr/> <p>Amount of Each Disbursement this Period 3,600.00</p> <hr/> <p><input type="checkbox"/> Memo Item</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Patrick Murphy</p> <hr/> <p>Mailing Address 4521 PGA Blvd #412</p> <hr/> <p>City State Zip Code Palm Beach Gardens, FL 33418</p> <hr/> <p>Purpose of Disbursement Transfer</p> <hr/> <p>Candidate Name Patrick Murphy</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <hr/> <p>State: FL District:</p>	<p>Date of Disbursement MM / DD / YYYY 09 / 30 / 2016</p> <hr/> <p>Amount of Each Disbursement this Period 230.00</p> <hr/> <p><input type="checkbox"/> Memo Item</p>
<p>SUBTOTAL of Disbursements This Page (optional).....</p> <hr/> <p>TOTAL This Period (last page this line number only).....</p> <hr/>	

201610180200441937

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 3

☐ 17 ☒ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
2016 Senate IMPACT

A. Full Name (Last, First, Middle Initial) Missourians for Kander		Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 09 / 30 / 2016 </div>	
Mailing Address PO BOX 548			
City State Zip Code Columbia, MO 65205		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px;"> \$ 6,400.00 </div>	
Purpose of Disbursement Transfer		<input type="checkbox"/> Memo Item	
Candidate Name Jason Kander		Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: MO District:			

B. Full Name (Last, First, Middle Initial)		Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>	
Mailing Address			
City State Zip Code		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px;"> \$ / </div>	
Purpose of Disbursement		<input type="checkbox"/> Memo Item	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

C. Full Name (Last, First, Middle Initial)		Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y </div>	
Mailing Address			
City State Zip Code		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px;"> \$ / </div>	
Purpose of Disbursement		<input type="checkbox"/> Memo Item	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 2px;"> \$ 6,400.00 </div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 2px;"> \$ 801.83 </div>

201610180200441938

Faxed
or
Hand Delivered

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-14-16
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-14-16

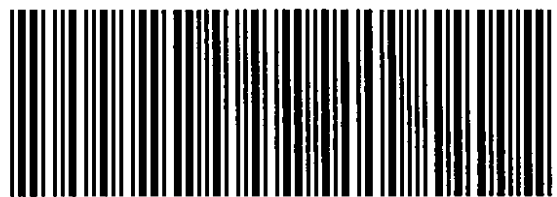
4/04/16

201610180200441940



SEN PATCH

1



SEN PATCH

201610180200441941